OAHU COMMITTEES-SUBMIT 1 ORIGINAL AND 1 COPY NEIGHBOR ISLAND COMMITTEES. SUBMIT 1 ORIGINAL AND 2 COPIES

## STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

## **DISCLOSURE REPORT** NONCANDIDATE COMMITTEE



Date Form NC-3 (Rev. 11/97)

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSUR	RE REPORT CAN BE	FOUND IN THE "GUIDEBOOK FOR NONCA	NO:DATE COMMITTEES.*)
SECTION I-NONCANDIDATE COMMITTEE:	SECTION II-TYPE OF REPORT:		
(a) Committee Name:	(See the Schedule of Reporting Dates to complete this section)  [✓] Preliminary Primary [ ] Amended		
Haliimaile General Store			
(b) Mailing Address: 900 Hallimaile Rd	[ ] Final Primary [ Short Form [ ] Preliminary General [ ] 13 REBORTING PERIOD		
Makawao, HI 96768			
(c) Phone (Bus) (808) 572-2666 (Res)	[ ] Final El	ection Period 1/1/06	through 9/8/06
Treasurer's	[ ] Suppler	mental RECEIVE	
SECTION III (Part 1)-SUMMARY O	F RECEIPTS A alf of this Form	Before Completing This Section COLUMN A	) COLUMN B ELECTION PERIOD
Cash on Hand at the Beginning of the Election Period (Continuing Com	mittaal OP at	TOTAL THIS PERIOD	TOTAL TO DATE
the time the Organizational Report was Filed (New Committee)	······································		0.00
2. Cash on Hand at the Beginning of this Reporting Period		0.00	
3. Total Receipts (From Line 11, Column A and B)	********	1,200.00	1,200.00
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Colum	nn B)	1,200.00	1,200.00
Total Disbursements (From Line 14, Column A and B)	•••••••	1,200.00	1,200.00
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 f Columns A and B)	rom Line 4 for	0.00	0.00
SECTION III (Part 2)-DETAILED SUMMAF (If Necessary, Complete Schedules A thr	RY OF RECEIP	TS AND DISBURSEMENTS Completing This Section)	
RECEIPTS			
7. Monetary Contributions of \$100 or Less	**************		
8. Non-Monetary Contributions of \$100 or Less	*********		
9. Aggregate Monetary and Non-Monetary Contributions of More Than \$1  Schedule A, Line 2 for Column A]	00	1,200.00	1,200.00
10. Other Receipts (Schedule D, Line 2 for Column A)	***************************************		
11. Total Receipts (Add Lines 7 through 10 for Columns A and B)		1,200.00	1,200.00
2. Contributions To Candidates (Schedule B, Line 2 for Column A)		1,200.00	1,200.00
3. Expenditures (Schedule C, Line 2 for Column A)			
4. Total Disbursements (Add Lines 12 and 13 for Columns A and B)	***************************************	1,200.00	1,200.00
hereby certify that the information on this report and all attached Schedules	are true, corre	ct and complete to the best of m	ny knowledge.
Barlanon	(for	while	The state of the s
Committee Chairperson Signature Date	Treasurer Sign	ature	Date